

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
O.I.P.E. CLASSIFIER		99	10/14/00
FORMALITY REVIEW	CR	823	11/09
RESPONSE FORMALITY REVIEW	X	676	01/19/01

09-676296

INDEX OF CLAIMS

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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